

CONTRACT / MODIFICATION
PROJECT MANAGER APPROVAL FORM
Revised 9-13-04

DATE:

TO:

FROM:

EMAIL:

Project No.:	Project Description:		
PIN No.:	Contract No.:	Mod. No.:	Job/Proj (CID) No.:

Fee Type:	Unit Price	Lump Sum	Cost Plus Fixed Fee	
Consultant Selection Type:	Pool	Standard RFQ	Streamlined RFQ	Engineer of Record
Pool – Period:	2005-2007	2003-2005	2001-2003	1999-2001
Work Discipline:				

Consultant:	Local Government Entity:
Project Contact Name:	Project Contact Name:
Contact Title:	Contact Title:
Phone No.:	Phone No.:
Email Address:	Email Address:

Contract / Modification Project Completion Date:

Contract / Modification Approval Amount (\$):
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THIS FORM IS CERTIFYING THAT THE UDOT PROJECT MANAGER HAS REVIEWED AND APPROVED THE FOLLOWING CONTRACT / MODIFICATION CONSULTANT DOCUMENTS:
<ul style="list-style-type: none">❖ Work Plan / Scope of Work❖ Cost Proposal❖ Staffing Plan❖ Quality Control/Quality Assurance Plan❖ Work Schedule❖ Project Specific Insurance Certificate❖ Sub Consultant (s) Work Plan & Cost Proposal❖ Local Entity - Letter of Concurrence

